

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

NOTICE TO STUDENTS ENTERING SEPTEMBER 1946

Unless otherwise notified, all students in the Class entering in September 1946 are eligible to wear the uniform bib. Unfortunately, these have not yet been received from the manufacturer, but we expect them momentarily. Assignments for students eligible for the bib, however, will proceed as originally planned. This means that students may be assigned from now on to Out-Patient or to night assignments, in spite of the fact that the bib is not worn.

3/6/47
RS:BF

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

Miss Sleeper

file

MASSACHUSETTS GENERAL HOSPITAL
School of Nursing

Notice to Nurses

Regarding Ration Books

Ration Books maybe returned to their owners. Each nurse is asked to present her receipt during Nursing Office hours when she calls for her book.

ESL:alb
2-20-47

Ruth Sleeper, R. N.
Director, School of Nursing
and Nursing Service

MISS SLICPER
MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

June 30, 1947

The cooperation of all graduate and student nurses is asked in an effort to reduce the cost of ward supplies. Because of increasing prices, ward supplies are almost double in cost as compared with the supplies of a year ago.

Unless we can reduce the amount of supplies used voluntarily, it may be necessary to curtail the amounts issued from the store and pharmacy. Reduction can be made by careful handling of equipment and by cautious use of materials. Reduction will also be made if all nurses will conscientiously adhere to the regulation that ward supplies are not to be carried out of the Hospital or to the Nurses' Residences. Linen supplied to the ward is needed for the patients. The supply is scarce! Wipettes, adhesive and other ward supplies are costly. The amount of ward supplies ordered from the store and the pharmacy should not exceed the patients' needs.

THE SITUATION IS SERIOUS.

RS:BF

Ruth Slicper R.N.
Director of the School of Nursing
and Nursing Service

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

**** NOTICE ****

All members of the class entering in February 1945 are requested to wear the checked uniform on Saturday, December 21. Students on day schedule please come to the Nursing Office before ten minutes of seven in the morning for uniform inspection. Students on evening schedule come to the Nursing Office before 20 minutes past two on Saturday afternoon. Students on night schedule will wear the uniform the night of the 21st, but report to the Nursing Office on Sunday morning for inspection. Students having the day off on Saturday will report at some time on Sunday.

12/19/46
RS:BF

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

file

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

November 14, 1947

Beginning on January 1, 1948 there will be a two week time allowance for student illness. Interpreted this means that students who are ill 14 days or less during the three years will not be required to make up this time. The first class to benefit under this new plan will be the class graduating in February, 1948.

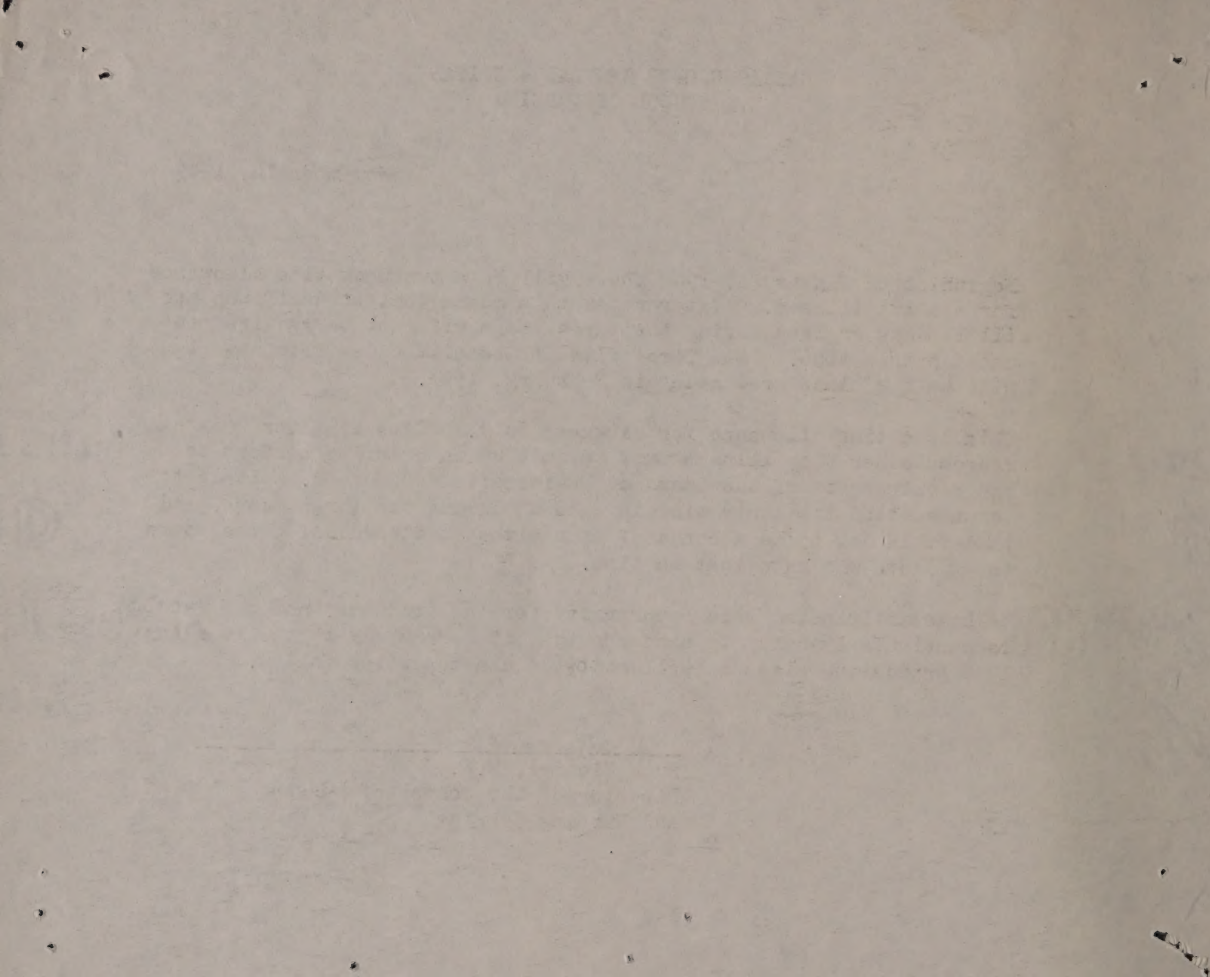
This is a time allowance for sickness only. Time lost for personal reasons other than illness must be made up in order to conform to the requirements of the Board of Registration of Nurses. It is to be understood that this time is used up during the three years, and that it is not to be a bonus of time given at the end of three years to students who have lost no time.

We have anticipated this opportunity for the students, and the Faculty is particularly happy to announce that it does apply to the February 1948 graduating class as well as to the classes which follow.

Ruth Sleeper

Ruth Sleeper, R.N.
Director of the School of Nursing
And Nursing Service

RS:BF



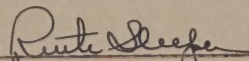
MASSACHUSETTS GENERAL HOSPITAL

SCHOOL OF NURSING

Beginning on Wednesday, May 26, 1948 restrictions relative to smoking in uniform in the Nurses' Dining Room are withdrawn. Those who smoke are asked to cooperate by sitting in the window section of the dining room, in order that those to whom the smoke is objectionable may also have a comfortable place in which to eat.

As some patients object to the odor of smoke, all nurses are asked to be thoughtful in this respect, and to be sure that hands are washed before patients are approached.

Under no circumstances are nurses in uniform or out of uniform to smoke elsewhere in the Hospital, except in the Graduate Nurses' Smoking Room in the basement of the Phillips House. Students are asked not to go to the Phillips House Smoking Room, and graduates who do not live in the residences are asked not to go to the smoking rooms in the residences unless visiting a friend.



Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

5/25/48
RS:BF

THE HISTORY OF THE

REIGN OF

CHARLES THE FIRST

BY

JOHN BURNET

OF THE UNIVERSITY OF OXFORD

IN TWO VOLUMES

THE SECOND VOLUME

1679

LONDON

Printed by J. Streater, at the Sign of the Gun, in St. Dunstons Church-yard

1680

Printed by J. Streater, at the Sign of the Gun, in St. Dunstons Church-yard

1680

Printed by J. Streater, at the Sign of the Gun, in St. Dunstons Church-yard

1680

Printed by J. Streater, at the Sign of the Gun, in St. Dunstons Church-yard

August 21, 1946

Memorandum:

TO: Mr. Tolson
FROM: Mr. E. A. Tamm
SUBJECT: [illegible]
[illegible]
[illegible]

Please set down in writing your ideas as to how
monthly rates with time and a half overtime could be
applied to your department.

H. V. [illegible], M.D.
Director

THW: [illegible]

Massachusetts General Hospital

Boston 14

Nathaniel W. Faxon, M.D.
Director

August 31, 1948

Memorandum:

To: Mr. Clarke
Mr. Kinsman
✓ Miss Sleeper
Miss Floyd

Please set down in writing your ideas as to how hourly rates with time and a half overtime could be applied to your department.

N. W. Faxon
N. W. Faxon, M.D.,
Director.

nwf:arm

PS.

MASSACHUSETTS GENERAL HOSPITAL

651.125 ✓

Notice

The customary two hours Christmas shopping time for supervisors, instructors, head nurses and assistant head nurses will be granted this year. Shopping time is to be taken before December 22nd, and is not to be added to a weekly afternoon off duty.

One-half of the staff nurses assigned to each ward on day duty may be off duty all day Christmas, and the other half may be off all day on New Years Day.

Each graduate must find out whether she may be assigned to night duty before making plans. She may consult with Miss Hicks.

ESL:EM
12/4/48

Ruth Sleeper, R. N.
Director, School of Nursing
and Nursing Service

MASSACHUSETTS GENERAL HOSPITAL

Notice

The customary two hours Christmas shopping time for supervisors, instructors, head nurses and assistant head nurses will be granted this year, between November 28 and December 22, on some day other than a weekly afternoon off duty.

Please indicate the shopping hours on the time slip.

11-23-49
ESL:BF

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

GRADUATE NURSES - STUDENT NURSES - LICENSED ATTENDANTS

A T T E N T I O N

American Nurses' Association
1790 Broadway, New York 19

NURSES TO BE CLASSIFIED IN 1950 CENSUS

On April 1, 1950, census enumerators will visit every household to collect information for the 17th decennial census.

Information such as name, sex, age, relationship to the head of his household and place of birth will be asked of everyone. Additional data will be asked of 20% of the population.

Everyone over 14 years of age will be asked to describe the job at which they worked the previous week. All those seeking work will be asked to describe the job which they last held. In order to have accurate data on nurse power in the 1950 census, it is important that nurses report correct information on employment. For census purposes, a person's job is described by answering three questions. Each nurse should report to the enumerator:

1. Occupation - "What kind of work were you doing"?

If you are a registered (professional) nurse, report "registered nurse", practical nurses report "practical nurse" and midwives (nurses and non-nurses) report "midwife".

Professional nurse students report "Student professional nurse", students in schools of practical nursing report "Student practical nurse".

2. Business or industry - "What kind of business or industry were you working in"?

Report the kind of place in which you work, i.e., hospital, insurance company, physician's office, automobile factory, public health agency, school, etc. Private duty nurses report "private duty". Students report "hospital".

3. Class of worker - "Did you work for a private employer, government agency or were you self-employed"?

Private duty nurses report "self-employed". Other nurses report "private worker" if employed by a private organization or "government worker" if employed by a government agency, whether federal, state or local.

Pass this information along to other nurses and to students. Discuss it so that all members of the profession will be familiar with the questions to be asked and the response to be given. Validity of the findings depends on accurate reporting by each individual.

6-50

Massachusetts General Hospital

Boston 14

IN BOSTON

GENERAL HOSPITAL
BAKER MEMORIAL
PHILLIPS HOUSE

HALL-MERCER HOSPITAL
HUNTINGTON MEMORIAL HOSPITAL
VINCENT MEMORIAL HOSPITAL

DEAN A. CLARK, M.D.
GENERAL DIRECTOR

IN WAVERLEY

MCLEAN HOSPITAL
W. FRANKLIN WOOD, M.D.
DIRECTOR

May 29, 1950

To all
Members of the Staff:

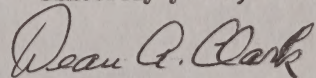
At its meeting on May 19, 1950 the Board of Trustees voted to air condition the largest part of the operating rooms in both Phillips House and Baker Memorial. This work will be accomplished on or about July first and the operating rooms, therefore, will be air cooled for most of the hot season of this summer.

This brings to mind the extremely low occupancy the Phillips House and Baker Memorial have experienced in July, August and September during the past three years. Such low occupancy is very expensive as the Hospital is obliged to keep most of its regular workers employed and it cannot, therefore, reduce costs to correspond with the low occupancy. Presumably, a part of this low occupancy is due to patients being on vacation, but it is believed from experience in other hospitals that the largest part is due to doctors being on vacation.

In view of the increased comfort and added safety to patients which will be provided by air conditioning the operating rooms, I wish to urge all staff members who possibly can do so to arrange their vacations so as to be here at least part of the period from July 15 to September 15, as it is this period during which the greatest slump has occurred.

Any efforts the staff can make to keep up the occupancy in the Phillips House and Baker Memorial during the summer will be much appreciated.

Sincerely yours,



Dean A. Clark, M.D.
General Director

dac:arm:ed

Massachusetts General Hospital

Boston 14

IN WAVERLY
MCLEAN HOSPITAL
W. FRANKLIN WOOD, M.D.
DIRECTOR

IN BOSTON
GENERAL HOSPITAL
BAKER MEMORIAL
PHILLIPS HOUSE
HALL-MERCER HOSPITAL
HUNTINGTON MEMORIAL HOSPITAL
VINCENT MEMORIAL HOSPITAL

DEAN A. CLARK, M.D.
GENERAL DIRECTOR

July 6, 1950.

To: The Staff
The Nursing Service

Re: Disturbed Patients in the General Hospital,
Baker Memorial, Phillips House.

Recently, a number of incidents have indicated lack of understanding of Hospital policy regarding disturbed patients. To clarify this policy, the following re-statement has been prepared. The policy applies to all units of the Hospital, and is to be observed meticulously throughout the wards, the Baker Memorial, and the Phillips House.

1. All patients, including those on the Psychiatric Service, are admitted to this hospital voluntarily. The hospital is not authorized to receive committed patients. No patient may be retained against his will. Any patient who wishes to leave the hospital when this is deemed inadvisable or dangerous by the appropriate House Officer or attending physician will be discharged against advice, and the patient or his family will be required to sign a statement to the effect that the situation has been explained to them and that they accept full responsibility.

2. Whenever a patient is sufficiently disturbed to require special precautions, a psychiatrist of the Psychiatric Service must be called in consultation. Head nurses are required to report to the appropriate Assistant Director any case of a disturbed patient who, in the opinion of the Head Nurse, is sufficiently disturbed to require special precautions but who has not been seen in consultation by a psychiatrist from the Psychiatric Service.

3. When, in the opinion of the consultant from the Psychiatric Service, a patient is sufficiently disturbed to require care ~~at~~ protection not practicable in the general wards, the Baker Memorial, or the Phillips House, the patient must be either

a. Transferred to floors B-7 or B-8; or

July 1, 1900

For the Agent
The Bureau

For the Agent in the General Office
The Bureau

Recently, a number of persons have indicated lack of
interest in the Bureau's policy regarding the Bureau's
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The Bureau's policy is to have a Bureau's policy.

July 6, 1950.

- b. Discharged to his home or to another institution. A reasonable time will be given to the family and the physician in charge of the patient to make the necessary arrangements but the discharge is to be expedited as rapidly as possible.

4. A disturbed patient who, in the opinion of the consulting psychiatrist from the Psychiatric Service, may be dangerous to himself or others if discharged from the hospital, is to be temporarily retained, if necessary against his will, until suitable arrangements for transfer can be made.

5. Whenever orders for "suicidal precautions" or other orders of a similar character are written on any patient, the Head Nurse concerned is required to notify the appropriate Assistant Director who will see that proper measures are taken for protection, transfer or discharge.

6. The Psychiatric Service has sole responsibility for management of the psychiatric aspects of cases admitted to B-7 or B-8, whether the admission is as a temporary "boarder" or as a regular admission, whether the patient is admitted from outside or transferred from the Emergency Ward, the general wards, the Baker Memorial, or the Phillips House.

The above policy has been approved by the General Executive Committee.

Dean A. Clark, M.D.,
General Director.

dac:arm

Miss Sleeper

Massachusetts General Hospital

file

IN BOSTON
GENERAL HOSPITAL
BAKER MEMORIAL
PHILLIPS HOUSE

Boston 14

IN WAVERLEY
MCLEAN HOSPITAL
W. FRANKLIN WOOD, M.D.
DIRECTOR

HALL-MERCER HOSPITAL
HUNTINGTON MEMORIAL HOSPITAL
VINCENT MEMORIAL HOSPITAL

*File Under S
Cross File Under P
Ward Routine
Book*

15-50

DEAN A. CLARK, M.D.
GENERAL DIRECTOR

July 24, 1950

*Copies to
all wards
day & night. Super.
Clinical Nursing Dept.
Baker*

To: The Staff
The Nursing Service

Re: Disturbed Patients in the General Hospital,
Baker Memorial, Phillips House.

Recently, a number of incidents have indicated lack of understanding of Hospital policy regarding disturbed patients. To clarify this policy, the following re-statement has been prepared. The policy applies to all units of the Hospital, and is to be observed meticulously throughout the wards, the Baker Memorial, and the Phillips House.

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2. Whenever a patient is sufficiently disturbed to require special precautions, a psychiatrist of the Psychiatric Service must be called in consultation. Head nurses are required to report to the appropriate Assistant Director any case of a disturbed patient who, in the opinion of the Head Nurse, is sufficiently disturbed to require special precautions but who has not been seen in consultation by a psychiatrist from the Psychiatric Service.

3. When, in the opinion of the consultant from the Psychiatric Service, a patient is sufficiently disturbed to require care or protection not practicable in the general wards, the Baker Memorial, or the Phillips House, the patient must be either

a. Transferred to ward B-8; or

b. Discharged to his home or to another institution.
A reasonable time will be given to the family and the physician in charge of the patient to make the necessary arrangements but the discharge is to be expedited as rapidly as possible.

4. A disturbed patient who, in the opinion of the consulting psychiatrist from the Psychiatric Service, may be dangerous to himself or others if discharged from the hospital, is to be temporarily retained, if necessary against his will, until suitable arrangements for transfer can be made.

July 24, 1950

5. Whenever orders for "suicidal precautions" or other orders of a similar character are written on any patient, the Head Nurse concerned is required to notify the appropriate Assistant Director who will see that proper measures are taken for protection, transfer or discharge.

6. The Psychiatric Service has sole responsibility for management of the psychiatric aspects of cases admitted to B-7 or B-8, whether the admission is as a temporary "boarder" or as a regular admission, whether the patient is admitted from outside or transferred from the Emergency Ward, the general wards, the Baker Memorial, or the Phillips House.

The above policy has been approved by the General Executive Committee.

Dean A. Clark
Dean A. Clark, M.D.,
General Director.

DAC/arm/emm

12

Ruth Sleeper

28-50

✓

MASSACHUSETTS GENERAL HOSPITAL
NOTICE

Replacement of Washed Gauze by Liscc, Cotton Filled Sponges

Beginning the week of October 30, 1950, washed gauze and new gauze will no longer be issued to the floors. Liscc, cotton filled sponges will replace washed gauze. They are to be used whenever highly absorptive power and softness is the primary need. They are to be ordered from the store by the package (100 to a package). The commodity number is 6733.

No type of gauze is to be salvaged.

ESL:EC
10-30-50

Ruth Sleeper, R. N.
Director, School of Nursing
and Nursing Service

*Sent to all wards, Gen. Rm. P.H.
day + night supervisors
clinical, nursing, prence instructors
O.R. areas.
Blood Bank
Mr. Hargins.*

NOTICE

TO ALL GRADUATE NURSES

It is to be expected that notices may be received from time to time relative to special opportunities for nurses in foreign military service. As there is a very real urgency about these requests at times, it would be helpful if I might have a list of nurses to call directly when the notice is received.

Will any nurse interested in military service in Japan or elsewhere in the Pacific area, please leave a note for me in the Nursing Office.

Also, will any graduate who is planning to enter the military service, please notify the Nursing Office in the Division where she is employed at the time the application for military service is submitted. This will in no way effect the graduate's status or opportunities in the Hospital. It will help the nursing service during this period of shortage better to plan for coverage when the nurse is called.

9/16/50
RS/LL

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

It has come to my attention that students are not destroying discarded School caps. May I ask that every cap, not held in the possession of its owner, be so torn that it cannot be worn or used for a pattern.

The M.G.H. cap, like caps of other schools of nursing, is sought by unscrupulous persons who wish to pass as graduate nurses. This may result in unsafe practices to the patients' disadvantage.

PLEASE DESTROY ALL DISCARDED CAPS.

Ruth Sleeper

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

RE:BF

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

February 14, 1952

It has come to my attention that too many students are oversleeping, and therefore not reporting to the wards promptly when due on at 7 or 11, or at other times during the day. It has also come to my attention that students are themselves changing time on time slips, both on the wards, in the Out-Patient, and in other departments. Because it is not possible to administer a satisfactory nursing situation when individuals do not follow the plan as it is set up, and because serious emergencies could grow out of such failures to report, or modification of time slips without permission from the nurse in charge, I am asking hereafter that all students who are late on duty, or all students who change time without permission from the nurse in charge, either report or be reported to Miss Stewart or to me. Students are asked to cooperate with this plan. Failure to do so will be considered of a serious nature.

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

RS:HF

Ruth Sleeper

MASSACHUSETTS GENERAL HOSPITAL
NURSING DEPARTMENT

Cancelled

July 25, 1952

Further investigation is under way concerning changes necessary in the Operating Room to prevent explosions of anesthetics, due to static ignition. Most of the possible sources of danger concern the equipment or the construction of the operating room itself. However, it is also important that the clothing of the nurses, doctors, and non-nurse personnel be properly conductive so that the static electricity which accumulates on the body and clothing may be conducted off.

Beginning on August 4, 1952 all graduate and student nurses and nursing personnel in the operating room are asked to wear cotton stockings and shoes with leather soles; composition and crepe rubber soles are non-conductive. Women nurses and personnel are also asked to wear a cotton slip in lieu of a nylon slip.

The nurses and other personnel having questions about this directive should see Miss May in sufficient time to secure the proper wearing apparel.

Student nurses who have questions about this directive should see Miss Stewart.

It is true that we have been fortunate thus far in respect to accidents with anesthetics. However, we can no longer take the responsibility that either equipment or clothing may give off sparks which will cause a serious explosion. Two weeks are being allowed for this readjustment. After August 4th there can be no further exception in these respects.

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

15-52

MASSACHUSETTS GENERAL HOSPITAL
NURSING DEPARTMENT

July 25, 1952

Further investigation is under way concerning changes necessary in the Operating Room to prevent explosions of anesthetics, due to static ignition. Most of the possible sources of danger concern the equipment or the construction of the operating room itself. However, it is also important that the clothing of the nurses, doctors, and non-nurse personnel be properly conductive so that the static electricity which accumulates on the body and clothing may be conducted off.

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The nurses and other personnel having questions about this directive should see Miss ~~May~~ ^{Coghlan} in sufficient time to secure the proper wearing apparel.

Student nurses who have questions about this directive should see Miss Stewart.

It is true that we have been fortunate thus far in respect to accidents with anesthetics. However, we can no longer take the responsibility that either equipment or clothing may give off sparks which will cause a serious explosion. Two weeks are being allowed for this readjustment. After August 4th there can be no further exception in these respects.

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

ESL/LL
7/25/52

MASSACHUSETTS DEPARTMENT OF
CORRECTIONS

July 22, 1932

Further investigation is under way concerning the case recently
in the Operating Room to prevent recurrence of similar cases. It is
stated that the case of the possible murder of George Campbell, the
equipment of the operating room itself, is under
it is also important that the closing of the present hospital and
non-human personnel be properly conducted so that the state should
city which accumulates on the body and which may be conducted off.

Investigation on August 5, 1932. All persons and children, nurses and
nurses, members of the medical staff, and others who were present
stocking and shoes with leather soles; non-conducting and other rubber
soles are non-conducting. Young nurses and personnel who were asked
to wear a cotton slip in lieu of a nylon slip.

The nurses and other personnel having questions about this
investigation should see Miss New in waiting room to receive the report.
Very respectfully,

Student nurses who have questions about this investigation should
see Miss Stewart.

It is true that we have been fortunate in having reports to
accidents with an electric. However, we can no longer take the person
attending the patient equipment or electrically with the patient which
will cause a serious condition. Two weeks ago police officers for this
residential. After during the there can be no further investigation in
these respects.

Miss Stewart,
Director of the School of Nursing
and Training Service

RECEIVED
7/22/32

Miss Sleeper

15-52

MEMORANDUM

July 7, 1952

To: Floor Supervisors of Nursing Staff on all Floors of
General Hospital
Senior Residents

From: L. R. Lezer, M.D., Assistant Director

Subject: Visiting Hours in the General Hospital

In order to ease the problem of patient care in the evening with the present visiting hour schedule, it is requested that the following changes be noted and executed by the personnel concerned:

1. Visiting hours in the General Hospital will be from 1:00 P.M. to 7:30 P.M.
2. It is requested that visitors to the General Hospital not be admitted after 7:00 P.M.
3. Visitors should be asked to leave the floors at 7:30 P.M.

We are anxious to allow patients to have visitors as much as is feasible, but we must also ascertain that such visiting does not interfere with the care of the patient, particularly during the evening hours.

LRL:mk
cc. Miss Sleeper
Miss Lepper
White Information Desk

Massachusetts General Hospital

Boston 14

IN BOSTON
GENERAL HOSPITAL
BAKER MEMORIAL
PHILLIPS HOUSE

BURNHAM MEMORIAL FOR CHILDREN
HALL-MERCER HOSPITAL
HUNTINGTON MEMORIAL HOSPITAL
VINCENT MEMORIAL HOSPITAL

DEAN A. CLARK, M.D.
GENERAL DIRECTOR

JAN 24 1953
IN WAVERLEY
MCLEAN HOSPITAL
W. FRANKLIN WOOD, M.D.
DIRECTOR

IN LINCOLN
STORROW HOUSE
(CONVALESCENTS)

January 21, 1953

TO: ALL DEPARTMENTS, LABORATORIES, NURSING SERVICE,
ASSISTANT DIRECTORS

FROM: L. R. LEZER, M.D., ASSISTANT DIRECTOR

Medical records of patients and particularly of fellow workers are being read and discussed publicly. The patient's record is by law a strictly confidential document.

By this memorandum I am asking that each department head admonish all personnel as to the seriousness of invading the private interests of the patient.

Medical records must not be read in other than a professional capacity, never out of mere curiosity.

LRL/tw

has been distributed ✓ ERL

Massachusetts General Hospital

Boston 14

IN BOSTON

GENERAL HOSPITAL
BAKER MEMORIAL
PHILLIPS HOUSE

BURNHAM MEMORIAL FOR CHILDREN
HALL-MERCER HOSPITAL
HUNTINGTON MEMORIAL HOSPITAL
VINCENT MEMORIAL HOSPITAL

DEAN A. CLARK, M.D.
GENERAL DIRECTOR

IN WAVERLEY

MCLEAN HOSPITAL
W. FRANKLIN WOOD, M.D.
DIRECTOR

IN LINCOLN

STORROW HOUSE
(CONVALESCENTS)

April 22, 1953

MEMORANDUM:

TO: Chiefs of Service
Department Heads

FROM: Dr. Dean A. Clark, General Director

At its meeting on April 17, the Trustees appointed Mr. Frederick D. Foster as an Assistant Director, effective as of April 1, 1953. As many of you know, Mr. Foster has been Administrative Resident since July 1, 1952 and we are much pleased to have him remain with the Hospital in this administrative capacity.

While Mr. Foster's duties will encompass the entire institution, as is the case with all Assistant Directors, his special field of interest will be that of supplies and equipment, for which he will supervise the writing of specifications, standardization, purchasing, storage, inventory control, issuing, maintenance, repair and disposal. I am sure all Chiefs of Service and Department Heads will welcome assistance in this important and often troublesome area.

Mr. Foster will welcome requests for his services and I am sure you will all wish to cooperate with him. His office will be in the Upper Store and the telephone extension is 360.

Dean A. Clark
Dean A. Clark, M.D.,
General Director

dac:arm:tw

MASSACHUSETTS GENERAL HOSPITAL

Medical House Staff

Gentlemen:

Probably by now all of you have become acquainted with the severe shortage in nursing personnel in the hospital and have heard rumors of a possible closure of a medical ward if some solution to this problem cannot be found. I am sure that everyone feels that this would be a calamity. Some help can be gained if certain compromises are made with the nursing staff. I strongly suggest the following:

1. Make every effort to reduce the number of orders which you write on a patient. If medications can be given equally effectively at one time, eliminate the dispensing of such medications at additional times; e.g., there would seem to be little point in giving vitamins three times daily when the same amount can be given equally effectively once daily.
2. The nursing staff will be instructed not to take blood pressure unless specifically ordered. Do not order blood pressures unless strictly indicated.
3. G. I. Charts will not be kept on gastric patients from now on unless specifically ordered. Heretofore they have been carried routinely on such patients.
4. The nursing staff will be instructed to take temperatures twice daily on patients for the first three days of hospitalization, and once daily thereafter, unless specifically ordered otherwise.
5. The house staff should consider the possibility of having some medication kept at the bedside, such as asperin, cremalin, and other medications which could hardly be used in excess. This will be, of course, left to the discretion of the house officer.
6. Intake and output charts must be kept at an absolute minimum and used only when vital.
7. Hot packs for arthritic patients consume a large portion of a nurse's time. These can be cut down to a degree by substituting hot baths whenever possible and hot soaks to wrists and ankles.
8. The members of the house staff are urged to do as much of the leg work of a ward by themselves as possible. Much of the material necessary for certain procedures can be collected by the house officer rather than by leaving this to the nurse.
9. Individual members of the house staff will doubtless think of other ways in which the nursing load can be lightened. Please put such ideas into effect whenever good judgment is not compromised.

JBS:C/bf

John B. Stanbury
Chief Resident

Medical Notes Staff

Continued:

Report by day all of the above doctors acquainted with the severe shortness of breath in the hospital and have heard reports of a possible closure of a medical ward in some position to which medical cannot be found. I am sure that everyone feels that this would be a calamity. Some help can be gained in certain circumstances made with the nursing staff. I strongly suggest the following:

1. Make every effort to reduce the number of visitors and visitors on a patient. If medications can be given orally effectively at one time, eliminate the dispensing of them medications at additional times; e.g., there would seem to be little point in giving vitamins three times daily when the same amount can be given orally effectively once daily.
2. The nursing staff will be instructed not to take blood pressure unless specifically ordered. Do not order blood pressure unless absolutely indicated.
3. G.I. orders will not be kept on cardiac patients from now on unless specifically ordered. Heretofore they have been carried routinely on such patients.
4. The nursing staff will be instructed to take temperatures twice daily on patients for the first three days of hospitalization, and once daily thereafter, unless specifically ordered otherwise.
5. The house staff should consider the possibility of having some medication kept at the bedside, such as atropine, morphine, and other medications which could be used in excess. This will be, of course, left to the discretion of the house officer.
6. Intake and output charts must be kept as an accurate minimum and used only when vital.
7. Bed orders for cardiac patients consume a large portion of a nurse's time. These can be cut down to a degree by substituting for words whenever possible and not words for words and phrases.
8. The number of the house staff are used to do as much of the work of a ward as themselves as possible. Most of a hospital's necessary for certain no nurses can be collected by the house officer rather than by leaving this to the nurse.
9. Individual members of the house staff will determine rank of other ways in which the nursing staff can be instructed. Please not even down into which whenever food treatment is not considered.

John F. Cavanaugh
Chief Physician

10/10/52

MASSACHUSETTS GENERAL HOSPITAL
NURSING DEPARTMENT

July 23, 1953

MEMORANDUM

To: *Send to each neon aide, by house*
From: Miss Lepper

Although it is the aim of the hospital to institute a forty hour week wherever possible, during the transition period it may be necessary to ask some of the aides to work overtime. There are at present some men who are working overtime at their own request, this we shall continue whenever a need exists.

We feel that it is wise to have some broad policies which will be mutually beneficial.

1. Everyone who works overtime is to have one free day weekly.
2. Unless an emergency exists, overtime may be requested up to four hours above an eight hour day.

In order that we may have some idea of the amount of help we may call upon when necessary, you are asked to answer the following:

1. Do you want to work overtime? _____
2. How many days would you be available weekly? _____

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

June 24, 1955

MEMORANDUM

TO: ALL STUDENTS
FROM: Miss Sleeper

Recently students have come to my attention out on the streets, and on buses and trains, inappropriately dressed. There have been instances of students on buses and trains in uniforms; there have been instances of students in the Hospital in shorts and slacks. There have been other instances of students on their way to church in full uniform with caps and sometimes no coats. This is an appeal to every student, asking her to refresh her memory on the proper use of the uniform.

The uniform is not to be worn outside the Hospital except in going to and from the residence.

The uniform is not to be worn in stores, unless it is at the corner of North Grove and Cambridge Street in the fruit and refreshment store, and the uniform is covered with a long coat and the cap is not worn.

The uniform is not to be worn to church except at the very early morning Mass, at which time it is to be covered by a coat. The cap is not to be worn.

The uniform is never to be worn outside the Hospital on buses and trains.

Slacks and shorts are not appropriate clothing for wear in the Hospital. They should never be worn in the Hospital buildings except as a student is going from the dormitory out of the Hospital building. In this case the student should move as promptly and as quietly as possible through the Hospital building.

Improper wear and use of the uniform is frequent cause of criticism of the School. Will you not help us to keep the situation right.

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

RS:BF

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

August 26, 1955

TO: Students at 4 North Grove Street House

As you probably know 10 graduate nurses from distant parts of the country have now come to us through the Red Cross and the Infantile Paralysis Foundation to help us in our emergency. We are all very grateful to these nurses who have been willing to leave their jobs and their homes to come to help at NGH.

I am making a special appeal to the students living in 4 North Grove, asking you also to help us at this time. The polio nurses are working very hard. Patients in respirators need tremendous care and support. These nurses should have adequate opportunity to rest. Will you make your contribution to the care of the polio patients in part by remembering to be quiet during the day for the night nurses, and in the early morning also remembering to be quiet for the evening nurses. We should very much like to have these special polio nurses realize how appreciative we are of their help.

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

RS:BF

Interesting ✓

The Massachusetts General Hospital

Boston 14

IN BOSTON

GENERAL HOSPITAL
BAKER MEMORIAL
PHILLIPS HOUSE

BURNHAM MEMORIAL FOR CHILDREN
HALL-MERCER HOSPITAL
HUNTINGTON MEMORIAL HOSPITAL
VINCENT MEMORIAL HOSPITAL

DEAN A. CLARK, M.D.
GENERAL DIRECTOR

IN WAVERLEY

MCLEAN HOSPITAL
W. FRANKLIN WOOD, M.D.
DIRECTOR

IN LINCOLN

STORROW HOUSE
(CONVALESCENTS)

DEC 17

December 15, 1936.

Memorandum:

To: Dr. Castleman
Dr. Adams
Dr. Prazier

It has already become apparent, as many people feared, that occupants of the Warren Building are encroaching on the Baker Memorial. This has taken the form of frequent use of the Baker elevators, traffic through the Baker floors, and in at least one instance, an attempt to make use of a Baker room for non-clinical purposes.

The floors of the Warren Building were connected to the Baker Memorial for the convenience of the staff occupying the Warren Building and of patients who may need to go to the offices or laboratories of that staff. It was never intended that this use should interfere with the proper operation of the crowded Baker Memorial. Therefore, I urge you to ask your entire group to be most scrupulous in not interfering with Baker.

Please use the Warren Building elevators as much as possible rather than the Baker elevators. Please do not go to the Baker floors except when necessary for clinical purposes. It must be clearly understood that no additional rooms in the Baker can be used by Warren Building occupants.

The doors between Warren Building and the Baker can be locked. If there is too much interference with the primary use of the Hospital, namely, patient care, these doors will have to be closed as a last resort.

Dean A. Clark, M.D.,
General Director.

das:arm

c.c. Dr. Neumann
✓ Miss Sleeper
Dr. J. C. White
Dr. Lindemann

MASSACHUSETTS GENERAL HOSPITAL
NURSING DEPARTMENT

August 27, 1957

-N-O-T-I-C-E-

TO: Private Duty Nurses - Graduate Nurses - Student Nurses - Practical Nurses
In all Divisions of the Hospital

The Labor Day week-end and the week following are always very difficult times because such a large number of senior students graduate during this period. We should be most appreciative if any nurses or student nurses are interested in overtime work during this period. We have need for help at night and in the daytime especially.

Will all graduates who would be willing to work extra time contact the Assistant Director of Nurses in their buildings. Student nurses will please contact Mrs. Flaherty as is the usual custom.

Ruth Sleeper
Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

RS:BF

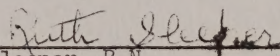
MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

NOTICE TO ALL TEACHERS

It has come to the attention of the Executive Committee of the Faculty that students are now generously offering to drive their cars for excursions.

Because to sanction this practice places the School in a position of responsibility in the event of accident, the Executive Committee of the Faculty voted to ask that instructors discontinue the practice of planning for transportation in student cars.

There is sufficient money already paid by students to cover the cost of a generous number of excursions. Shortly, you will be asked to share in setting up a plan for the equitable use of this money.



Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

RS:BF

THE
OFFICE OF THE
SECRETARY OF THE
NAVY
WASHINGTON, D. C.

Very respectfully,
Yours very truly,
[Signature]
[Name]
[Title]
[Address]
[City]
[State]
[Zip]

Enclosed for [Name]
[Address]
[City]
[State]
[Zip]

Massachusetts General Hospital

Boston 14

October 1, 1958

IN BOSTON
GENERAL HOSPITAL
BAKER MEMORIAL
PHILLIPS HOUSE

BURNHAM MEMORIAL FOR CHILDREN
HALL-MERCER HOSPITAL
HUNTINGTON MEMORIAL HOSPITAL
VINCENT MEMORIAL HOSPITAL

DEAN A. CLARK, M.D.
GENERAL DIRECTOR

IN WAVERLEY
MCLEAN HOSPITAL
W. FRANKLIN WOOD, M.D.
DIRECTOR

IN LINCOLN
STORROW HOUSE
(CONVALESCENTS)

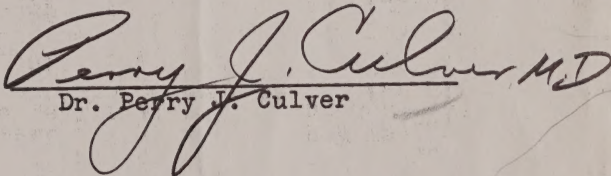
Memorandum

To: Department Heads
From: Dr. Perry J. Culver
Subject: Sick Leave Policy

To facilitate return of an employee to duty after an absence of only one day, Department Heads may sign the employee on without a check at Staff Clinic unless the Department Head or employee specifically requests a check at Staff Clinic.

All personnel absent more than one day, including night workers, must be checked back to duty by Staff Clinic before they may return to work.

PJC:sgd


Dr. Perry J. Culver

Memorandum for the President

October 12, 1946

1. The President has been informed that the following information has been received from the State Department:

2. The information received is that the following information has been received from the State Department:

3. The information received is that the following information has been received from the State Department:

4. The information received is that the following information has been received from the State Department:

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

ALL STUDENT NURSES

It has come to my attention that some student nurses are using their meal tickets to secure additional food for a friend or relative visiting during a meal hour. This is not only wrong, but dishonest. This increases the charges to the School of Nursing for food, and may deprive us of other benefits because the budget cannot be so stretched.

May I ask all students to be honest in this respect. I am sure friends and family will appreciate an explanation of your obligation to the School, and understand why you cannot invite them to the dining room without paying for them.

11-6-59
RS:BF

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

MEMORANDUM

TO: HEAD NURSE
FROM: MISS SLEEPER

Will you please express the appreciation of the School to all those who made it possible for the students to have the special time on Graduation Day, June 12? We appreciate more than we can say the interest and cooperation of the Nursing Service group at such a time. Although we never write to tell you so we appreciate it all the year through too, because without such cooperation there could not be a satisfactory clinical experience necessary for a good School.

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

MASSACHUSETTS GENERAL HOSPITAL
NURSING DEPARTMENT

June 22, 1961

MEMORANDUM

TO: Administrative and Teaching Staffs of the Nursing Department

FROM: Miss Sleeper

As the warm season approaches, it is time again to consider the type of clothing appropriate when on duty in any part of the Hospital. The School of Nursing and Nursing Service have felt that street clothes were appropriate when nurses were working away from patient areas, but that only the uniform, or in rare instances well chosen street clothes with long white coat, should be worn in wards or clinics. Good form in street clothes for work anywhere in the Hospital avoids sleeveless or very low neck dresses, and excessively thin dresses and blouses without adequate slips. Stockings should always be worn.

Will you please help us and encourage others responsible to you to maintain appropriate standards?

RS:BF
HFE/
6/22/61

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

All student nurses are requested to observe the following regulations for visiting patients on the wards, or in the private buildings - PLEASE

1. Do not return to wards or floors to visit sick nurses or relatives or friends from outside the Hospital without permission from the Nursing Office in the building where the patient is located. This is somewhat different than the privilege granted visitors coming into the hospital. The difference lies, of course, in the fact that persons residing at the Hospital can visit easily and so tend sometimes unthinkingly to deprive the patients of needed rest. The primary cause of illness in students who are patients is fatigue. Please help your friends get well too. Let them rest.
2. Continue the custom of wearing informal uniforms when visiting all patients in the Hospital (i.e. no cap, bib, or apron) at all times except at Phillips House.
3. Do not return to the wards in free hours to visit hospital patients not known to you prior to the patient's admission, unless permission is secured from the Nursing Office in the building where patient is located.
4. Visit within the limits of the Hospital visiting hours, White, Bulfinch, Vincent-Burnham, 1-7. Baker, Phillips, 1-8. The visiting regulations apply equally to patients who are out in the Bulfinch Yard.

Ruth Sleeper, R. N.
Director of the School of Nursing
and Nursing Service

RS:alw
6/27/62

MASSACHUSETTS GENERAL HOSPITAL SCHOOL OF NURSING

N O T I C E

With the change in freshman schedule and responsibilities, it has been voted by the Executive Faculty to end required evening study period for the present class. This is done with the expectation that each student will continue to develop and utilize good study habits, to assume responsibility for seeking knowledge and understanding through self-disciplined study, and for utilizing resources for assistance. With the knowledge that about thirty students have been notified of serious current academic difficulty, it is expected that all residents of Charles Street will recognize the need for quiet for effective study.

Helen Sherwin
Coordinator, First Year.

12 February 1962

1. The first part of the document is a list of names and addresses, which are arranged in a columnar format. The names are written in a cursive script, and the addresses are written in a more formal, printed style. The list includes names such as "John Smith", "Mary Jones", and "Robert Brown", along with their respective addresses.

Coord. office
✓

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

TO ALL STUDENT NURSES

About two weeks ago, a woman, a friend of the School of Nursing, contrary to her usual custom stopped on the road to Cape Cod to pick up some girls. These girls who were hitchhiking to the Cape were M.G.H. students.

Fortunately in this instance the situation was a safe one, but we, the signers below, cannot overemphasize the dangers in hitchhiking, particularly for a girl, around Boston or elsewhere.

Because neither the School nor the S.N.C.A. can condone or take responsibility for such action, we are asking that no student associated with the School ever again attempt this mode of transportation. We are also asking the residence heads, residence hostesses, proctors, all students and faculty be alert to any exceptions to this policy.

Ruth Sleeper
Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

Betty Jean Abram
Betty J. Abrams
President, Student Nurses' Cooperative Ass'n

7-28-65
RS:BF

Theresa F. Hession
Theresa F. Hession
Chairman, Judiciary Board

MASSACHUSETTS GENERAL HOSPITAL

All graduate and student nurses are reminded that the Cafeteria operates on a cash basis. Any graduates or students who have unpaid bills in the Cafeteria must pay the amount due before the end of the month. Only when it receives its full amount due can the Cafeteria continue to give as satisfactory meals as it now offers. This is a business plan and must be so treated by all who eat in the Cafeteria.

Any student unable to pay her bill is asked to see Miss Sleeper personally.

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

RS:MF

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

NOTICE TO THE GRADUATING CLASS

Because the yard is so badly torn up, the Reception following the Graduation Exercises will not be held this year. Actually, there is no one or even two places combined large enough to hold over 500 people, the number attending. We hope you will explain the situation to your families, as we shall also try to do on September, 10. Thinking that you, your families and friends might wish to make other plans, this notice is being posted early.

7-27-65
RS:BF

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

TO ALL STUDENT NURSES

The Executive Faculty of the School of Nursing is growing increasingly concerned over the dangers involved in the use of motor cycles, motor bikes, or motor scooters by both driver and rider. We understand that some senior students now have scooters here at the M.G.H. The recent involvement of a student in a minor accident has alerted us to our responsibilities as a school.

It is, therefore, our present decision that no member of the Classes of 1966, 67 & 68 in the M.G.H. School, or no woman affiliating student should keep a motor scooter, cycle or motor bike here at the M.G.H. Exception is made at this time for members of the Class of 1965, since 5 seniors have expended money for this purpose, and have only 2 more months before graduation.

It is the feeling of the Executive Faculty that accidents which occur to students who keep their motor scooters, bikes, or cycles here, or to their M.G.H. friends who ride with them, involves more responsibility than the School should assume, morally, financially, or in relation to time lost from the program.

7-6-65
RS:BF

Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

TO ALL STUDENT BODIES

The Executive Faculty of the School of Nursing is growing increasingly concerned over the dangers involved in the use of motor cycles, motor bikes, or motor scooters by both driver and rider. We understand that some senior students now have licenses held in the M.V. The recent involvement of a student in a fatal accident has alerted us to our responsibility as a school.

It is, therefore, our present decision that no member of the Class of 1967, M.V. or in the M.V. License, or no member utilizing either should keep a motor scooter, cycle or motor bike here at the M.V. License is held at this time for members of the Class of 1967, since 2 months have a period away for this purpose, and have only 2 months before graduation.

It is the feeling of the Executive Faculty that accidents which occur to students who keep their motor scooters, bikes, or motor bikes, or to students who ride to their friends who ride to their friends more responsibility than the school should assume, morally, financially, or in relation to the loss of the student.

With Sincerely,
Director of the School of Nursing
and Nursing Division

7-6-67
HSE

Cord. office -

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

TO ALL SENIORS:

For the past few years, a practice of tearing uniforms seems to have grown up amongst the seniors. As I understand the situation, uniforms are torn off both on the wards and in the dining rooms.

Many professional members of the Hospital Staff have spoken with concern about this, and requests have been made to me that no such action be carried on on wards, in the dining rooms, or corridors.

The uniforms are of course yours. What you wish to do with them in your own dormitory rooms is your decision. What is done in public is neither your decision alone, nor even yours and mine. The Hospital wards and rooms belong to the public.

May I urgently request that no tearing of uniforms occur on wards, in corridors, or dining rooms this year, and that you ask your friends to respect the public's concern, even though they may not respect the M.G.H. uniform.

9-3-65
RS:BF

RS
Ruth Sleeper, R.N.
Director of the School of Nursing
and Nursing Service

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